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COMMONWEALTH OF KENTUCKY
TREY GRAYSON, SECRETARY OF STATE
SIXTY (60) DAY NOTICE AND ANNUAL REPORT
SEPTEMBER 1, 2006
MUST BE RECEIVED BY OCTOBER 31, 2006



0523673

ORGANIZATION ID #
0523673

STATE OR COUNTRY
OF INCORPORATION

KY

ORGANIZATION
DATE

10/08/2001

FILING
FEE

\$4.00

(1) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS

Changes made to the registered agent or registered office cannot be made on this form.
Complete (3) to request a form to be mailed or download form from web site.

SAMUAL G WELLS
210 ST RT
BELTON, KY 42324

(3) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO

Lisa Stone
RECEIVED

OCT 09 2006

SECRETARY OF STATE
COMMONWEALTH OF KY

(2) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

MOONRISE BLUFF ESTATES PROPERTY OWNERS' ASSOCIATION, INC.
P O BOX 111
BELTON, KY 42324

(4) THE PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO

346 Wilson Road
Lewisburg, KY 42256

(5) PRINCIPAL OFFICERS If the corporation has previously filed an annual report, verify the names and titles of officers listed below. Please note any additions to or changes in the principal officers and give the business address for each person listed. If (5) is blank, type or print the names and business addresses of the current principal officers. If sole officer, please note. The annual report will be returned if business addresses are not listed.

Treasurer	Joy L Wells	CAROL Lehman	1153 Helford Lane Carmel, IN 46032
Secretary	Joy L Wells	CAROL Lehman	
Vice President	Samuel G Wells	Lisa Stone	346 Wilson Road Lewisburg, KY 42256
President	Samuel G Wells	Lisa Stone	

(6) DIRECTORS Type or print the names and business addresses of the corporation's directors. No listing of directors is verification that the corporation has dispensed with directors (KRS 271B.8-010(3)). Nonprofit corporations must list three (3) or more directors (KRS 273.211). The annual report will be returned if business addresses are not listed.

Joy L Wells	Lisa Stone	
Name	Samuel G Wells	Tim Stone
Name	GLAY J WELLS	CAROL Lehman
Name		
Name		

(7) Check here if you are a cooperative corporation or association organized under KRS 272. ☐

Check here if you are a rural electric or rural telephone cooperative corporation organized under KRS 279. ☐

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

X Lisa Stone TITLE President DATED 10/3/2006
Signature of Officer or Chairman of the Board

ANNUAL REPORT AND FILING FEE

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

MAILING ADDRESS

Trey Grayson
Secretary of State
P O Box 1150
Frankfort, KY 40602-1150

OFFICE LOCATION

Secretary of State
State Capitol, Room 154
700 Capital Avenue
Frankfort, KY 40601
(502)-564-2848

NOTE: P O Box 1150 is for
annual report filings only.